

[54] **SYSTEM AND METHOD FOR SCHEDULING AND REPORTING PATIENT RELATED SERVICES INCLUDING PRIORITIZING SERVICES**

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[56] References Cited

U.S. PATENT DOCUMENTS

3,872,448	3/1975	Mitchell, Jr.	364/200
4,835,372	5/1989	Combrich	235/462
4,857,713	8/1989	Brown	364/401
4,916,441	4/1990	Gombrich	235/380

OTHER PUBLICATIONS

Brimm, John E., "Computers in Critical Care", Critical Care Nursing Quarterly, Mar. 1987.

"Ulticare: A Bedside Patient Care Information System", Brochure from Health Data Sciences Corp.

"78707A POMS Clinical User's Guide", Brochure by Hewlett Packard, Jan. 1982.

"Better Care, Shorter Stays Thanks to Networking", Data Communications, Nov. 1986, Principi et al.

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[57] ABSTRACT

A hospital computerized system includes a terminal in all departments of the hospital for entering information pertinent to a patient's stay in the hospital. The initial information entered, as a part of the admitting procedure, includes the patient's history and admitting physician's physical examination results. It additionally includes the physician's orders for tests or hospital services to be performed. The system prints a history and physical report for the patient's chart and highlights the abnormal findings and complaints. The system additionally schedules all hospital services for the patient, thereby eliminating this responsibility from the nurses and other hospital personnel, and avoids situations where the patient is scheduled to be in two places at the same time. The scheduling system is capable of rescheduling tests or services in cases of emergencies. Test results and/or technicians's comments are entered into the system through terminals in each department and the results and comments are printed at the nurses' station for inclusion in the patient's chart. Additionally, physician's and nurses' notes and findings are entered into the systems and printed at the nurses' station for inclusion in the chart. The system finally prints a discharge planning document and a narrative discharge report for the chart, as well as a patient instruction document. The information entered into the system may be used by the billing program to bill the patient for all services and tests performed.

18 Claims, 3 Drawing Sheets

